

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 66 OF 928

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Cheri Bustos**

Full Name (Last, First, Middle Initial)

**ACTBLUE**

Mailing Address P.O. BOX 382110

City

CAMBRIDGE

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

182251.18

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		22		2015

Transaction ID : C10390011AB

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

**Karla Baehr**

Mailing Address 9 Stephen Place

City

Newton Highlands

State

MA

Zip Code

02461-2007

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Self

consultant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : C10407768A

Amount of Each Receipt this Period

500.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

**ACTBLUE**

Mailing Address P.O. BOX 382110

City

CAMBRIDGE

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

182251.18

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : C10407768AB

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

500.00